Medlearn Matters
Information for Medicare Providers

Related Change Request (CR) #: 3670 **Medlearn Matters Number:** MM3670

Related CR Release Date: December 30, 2004

Related CR Transmittal #: 14

Effective Date: January 1, 2005

Implementation Date: January 17, 2005

Chemotherapy Demonstration Project

Provider Types Affected

Physicians and non-physician practitioners billing Medicare carriers for chemotherapy services provided to cancer patients in an office-based practice in calendar year (CY) 2005

Provider Action Needed

This article and related CR 3670 provide information on the proper G-codes used when participating in the Chemotherapy Demonstration Project associated with caring for cancer patients who receive chemotherapy services in an office-based practice.

Background

In the Medicare Physician Fee Schedule final rule published on November 15, 2004 in the Federal Register, the Centers for Medicare & Medicaid Services (CMS) announced a one-year demonstration project for intravenous infusion or push chemotherapy services provided in an office-based practice. Practitioners participating in the project must provide and document specified services related to pain control management, minimization of nausea and vomiting, and the reduction of fatigue associated with chemotherapy. Submission of the applicable G-codes and claims will generate additional payment to the practitioner for submitting patient assessment data under this demonstration. Under this demonstration, cancer patients receiving chemotherapy are asked by practitioners about the degree to which they have been bothered by pain, nausea and/or vomiting, and fatigue symptoms. The patient's responses are reflected by reporting one G-code in the claim for each of the three symptoms that best approximates the patient's response. A G-code for each symptom (pain, nausea/vomiting, and fatigue) must appear on the claim for payment to be made under the demonstration.

By reporting the designated G-codes on the claim submitted for payment, the practitioner self-enrolls in the project and agrees to all of the terms and conditions of the demonstration. Payment under the demonstration applies only when the designated G-codes are billed in conjunction with chemotherapy service (defined as chemotherapy administered through intravenous push or infusion, using G-codes

G0357 or G0359, respectively) to treat cancer. Reporting the G-codes on the claim is all that is required as far as the documentation of the patient's response.

The following is a list of the G-codes to be used to report the corresponding levels for each of the three symptoms. These codes are only valid for payment for CY 2005 dates of service, and must be pointed to a cancer diagnosis.

Code	G-Codes for Assessment of Nausea and/or Vomiting
G9021	Chemotherapy assessment for nausea and/or vomiting, patient reported, performed at the time of chemotherapy administration; assessment level one: not at all (for use in a Medicare-approved demonstration project)
G9022	Chemotherapy assessment for nausea and/or vomiting, patient reported, performed at the time of chemotherapy administration; assessment level two: a little (for use in a Medicare-approved demonstration project)
G9023	Chemotherapy assessment for nausea and/or vomiting**,** patient reported, performed at the time of chemotherapy administration; assessment level three: quite a bit (for use in a Medicare-approved demonstration project)
G9024	Chemotherapy assessment for nausea and/or vomiting, patient reported, performed at the time of chemotherapy administration; assessment level four: very much (for use in a Medicare-approved demonstration project)

Code	G-Codes for Assessment for Pain
G9025	Chemotherapy assessment for pain, patient reported, performed at the time of chemotherapy administration, assessment level one: not at all (for use in a Medicare-approved demonstration project)
G9026	Chemotherapy assessment for pain, patient reported, performed at the time of chemotherapy administration, assessment level two: a little (for use in a Medicare-approved demonstration project)
G9027	Chemotherapy assessment for pain, patient reported, performed at the time of chemotherapy administration assessment level three: quite a bit (for use in a Medicare-approved demonstration project)
G9028	Chemotherapy assessment for pain, patient reported, performed at the time of chemotherapy administration, assessment level four: very much (for use in a Medicare-approved demonstration project)

Code	G-Codes for Assessment for Lack of Energy (Fatigue)
G9029	Chemotherapy assessment for lack of energy (fatigue), patient reported, performed at the time of chemotherapy administration, assessment level one: not at all. (for use in a Medicare approved demonstration project)
G9030	Chemotherapy assessment for lack of energy (fatigue), patient reported, performed at the time of chemotherapy administration, assessment level two: a little. (for use in a Medicare approved demonstration project)
G9031	Chemotherapy assessment for lack of energy (fatigue), patient reported, performed at the time of chemotherapy administration, assessment level three: quite a bit. (for use in a Medicare approved demonstration project)
G9032	Chemotherapy assessment for lack of energy (fatigue), patient reported, performed at the time of chemotherapy administration, assessment level four: very much. (for use in a Medicare-approved demonstration project)

The following allowances will be made for the demonstration assessment codes and payment will be based on the lesser of 80 percent of the actual charge or the following allowances by code:

G9021 to G9024 - $43.34

G9025 to G9028 - $43.33

G9029 to G9032 - $43.33

Please report only one G code from each symptom assessment category.

The amounts listed above apply in all locations and are paid on an assignment basis. The usual Part B coinsurance and deductible apply. The demonstration project is applicable to services provided on or after January 1, 2005 and on or before December 31, 2005. Medicare beneficiaries who are enrolled in a Medicare Advantage plan are excluded from the demonstration.

To see the official instruction issued to your carrier regarding this demonstration, go to:

http://www.cms.hhs.gov/manuals/transmittals/comm_date_dsc.asp

From that web page, look for CR 3670 in the CR NUM column on the right, and click on the file for that CR.

If you have any questions, please contact your carrier at their toll-free number, which may be found at:

http://www.cms.hhs.gov/medlearn/tollnums.asp